

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF

Gregory C. MILTON

COURT CASE NUMBER

CA 04-10482-MEL

DEFENDANT

C. HARRY F. SCALES et al

TYPE OF PROCESS

Service

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

YOUTH VIOLENCE STRIKE FORCE B. P. D.

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

367 Warren St, Roxbury, MA 02119

AT

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

 Gregory C. MILTON

LEONARD SHANCK HOSPITAL

170 MORTON STREET 9TH FLOOR

 Jamaica Plain, MA 02130

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

HARRY F. SCALES
YOUTH VIOLENCE STRIKE
FORCE
BOSTON POLICE DEPARTMENT
369 WARREN ST.
ROXBURY, MA 02119

Signature of Attorney or other Originator requesting service on behalf of:

Gregory C. Milton

 PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

617-524-4499

DATE

10/18/04

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.

(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

District to Serve

Signature of Authorized USMS Deputy or Clerk

Date

1

No. 38

No. 38

Mary Isabelle

10/21/04

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

 A person of suitable age and discretion then residing in the defendant's usual place of abode

Address (complete only if different than shown above)

 Date of Service 10/21/04 Time 11:30 am
 pm

Signature of U.S. Marshal or Deputy

Service Fee \$45.00

Total Mileage Charges (including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS:

10/21/04 - Placed in mail slot for Scales at above address
Scales works night shift. DS

UNITED STATES DISTRICT COURT

District of _____

Gregory L. MITTON

Plaintiff
v.

SUMMONS IN A CIVIL ACTION

Windell Jonsley, et al., CASE NUMBER:

Defendants.

04-10482 MEL

TO: (Name and address of Defendant)

HARRY F. Scales Lawyer

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

an answer to the complaint which is served on you with this summons, within 20 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

CLERK

Suzanne C. Jones

DATE

10-21-04

(By) DEPUTY CLERK



AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE		
Service of the Summons and complaint was made by me ⁽¹⁾	DATE	
NAME OF SERVER (PRINT)	TITLE	
<i>Check one box below to indicate appropriate method of service</i>		
<input type="checkbox"/> Served personally upon the defendant. Place where served: <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: <input type="checkbox"/> Returned unexecuted: <input type="checkbox"/> Other (specify):		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL \$0.00
DECLARATION OF SERVER		
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.		
Executed on _____	Date _____	<i>Signature of Server</i> _____
<i>Address of Server</i> _____		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.